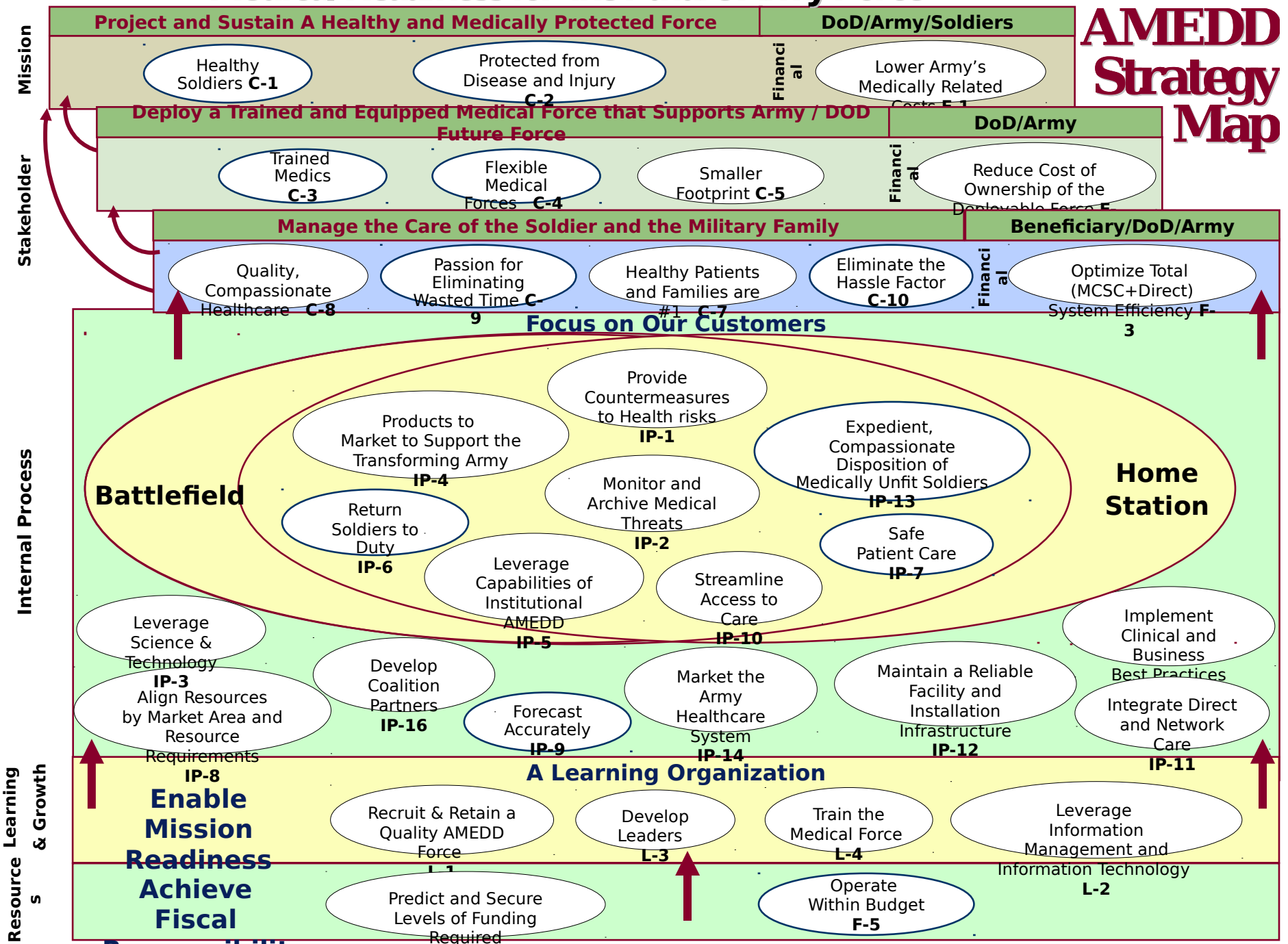
Medical Readiness for the Future Army Force

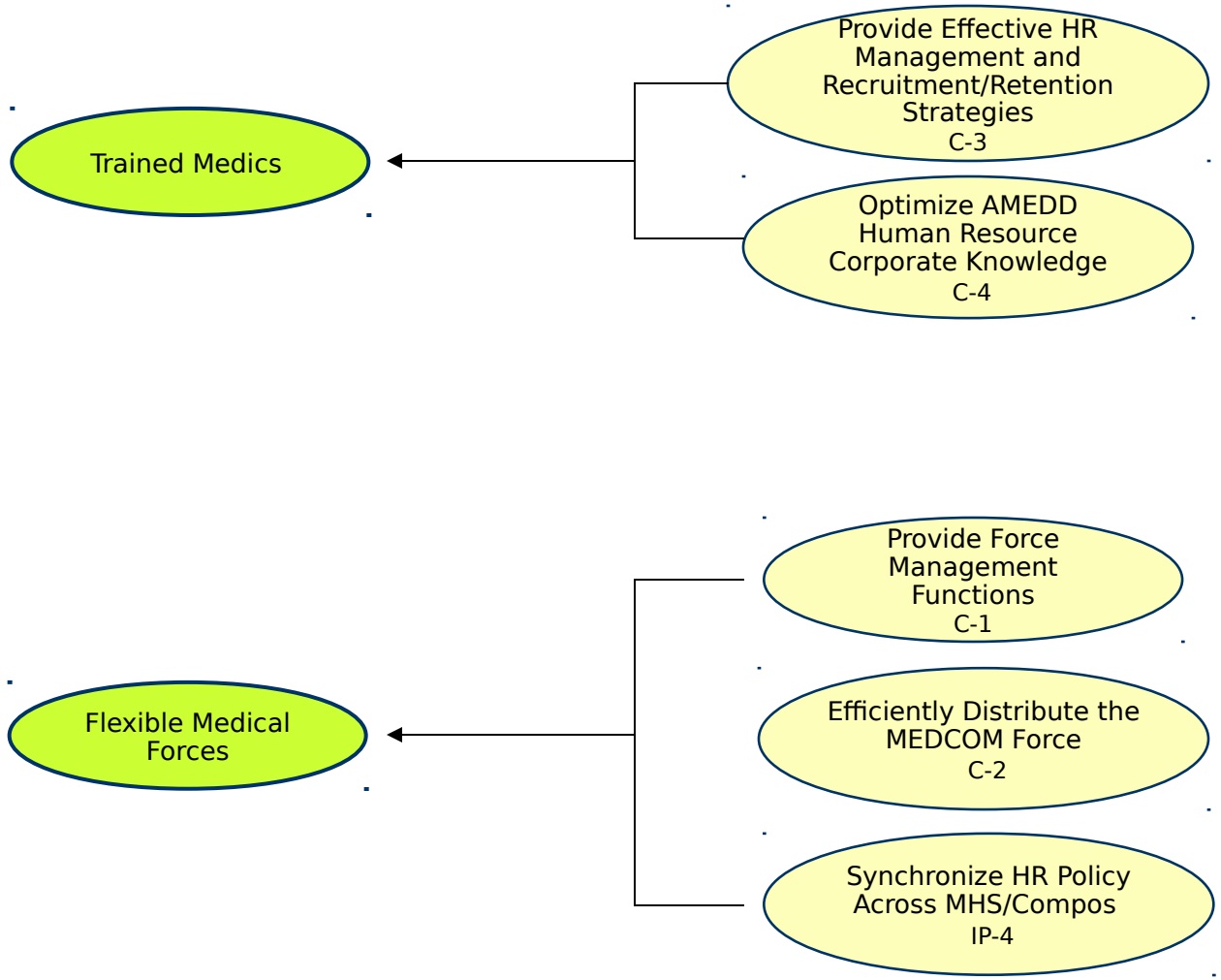
15 Oct 03

AMEDD Strategy Map


Mission
Project and Sustain A Healthy and Medically Protected Force
DoD/Army/Soldiers
Healthy Soldiers C-1
Protected from Disease and Injury C-2
Financial
Lower Army's Medically Related Costs F-1
Stakeholder
Deploy a Trained and Equipped Medical Force that Supports Army / DOD Future Force
DoD/Army
Trained Medics C-3
Flexible Medical Forces C-4
Smaller Footprint C-5
Financial
Reduce Cost of Ownership of the Deployable Force F-
Manage the Care of the Soldier and the Military Family
Beneficiary/DoD/Army
Quality, Compassionate Healthcare C-8
Passion for Eliminating Wasted Time C-9
Healthy Patients and Families are #1 C-7
Eliminate the Hassle Factor C-10
Financial
Optimize Total (MCSC+Direct) System Efficiency F-3
Focus on Our Customers
Internal Process
Battlefield
Home Station
Provide Countermeasures to Health risks IP-1
Products to Market to Support the Transforming Army IP-4
Expedient, Compassionate Disposition of Medically Unfit Soldiers IP-13
Monitor and Archive Medical Threats IP-2
Return Soldiers to Duty IP-6
Safe Patient Care IP-7
Leverage Capabilities of Institutional AMEDD IP-5
Streamline Access to Care IP-10
Leverage Science & Technology IP-3
Develop Coalition Partners IP-16
Implement Clinical and Business Best Practices
Align Resources by Market Area and Resource Requirements IP-8
Forecast Accurately IP-9
Market the Army Healthcare System IP-14
Maintain a Reliable Facility and Installation Infrastructure IP-12
Integrate Direct and Network Care IP-11
Learning & Growth
A Learning Organization
Enable Mission Readiness
Recruit & Retain a Quality AMEDD Force L-1
Develop Leaders L-3
Train the Medical Force L-4
Leverage Information Management and Information Technology L-2
Resources
Achieve Fiscal
Predict and Secure Levels of Funding Required
Operate Within Budget F-5

Dir of Personnel/ACSPER Customer/Stakeholder Mapping to AMEDD BSC

AMEDD | Directorate of Personnel/ACSPER



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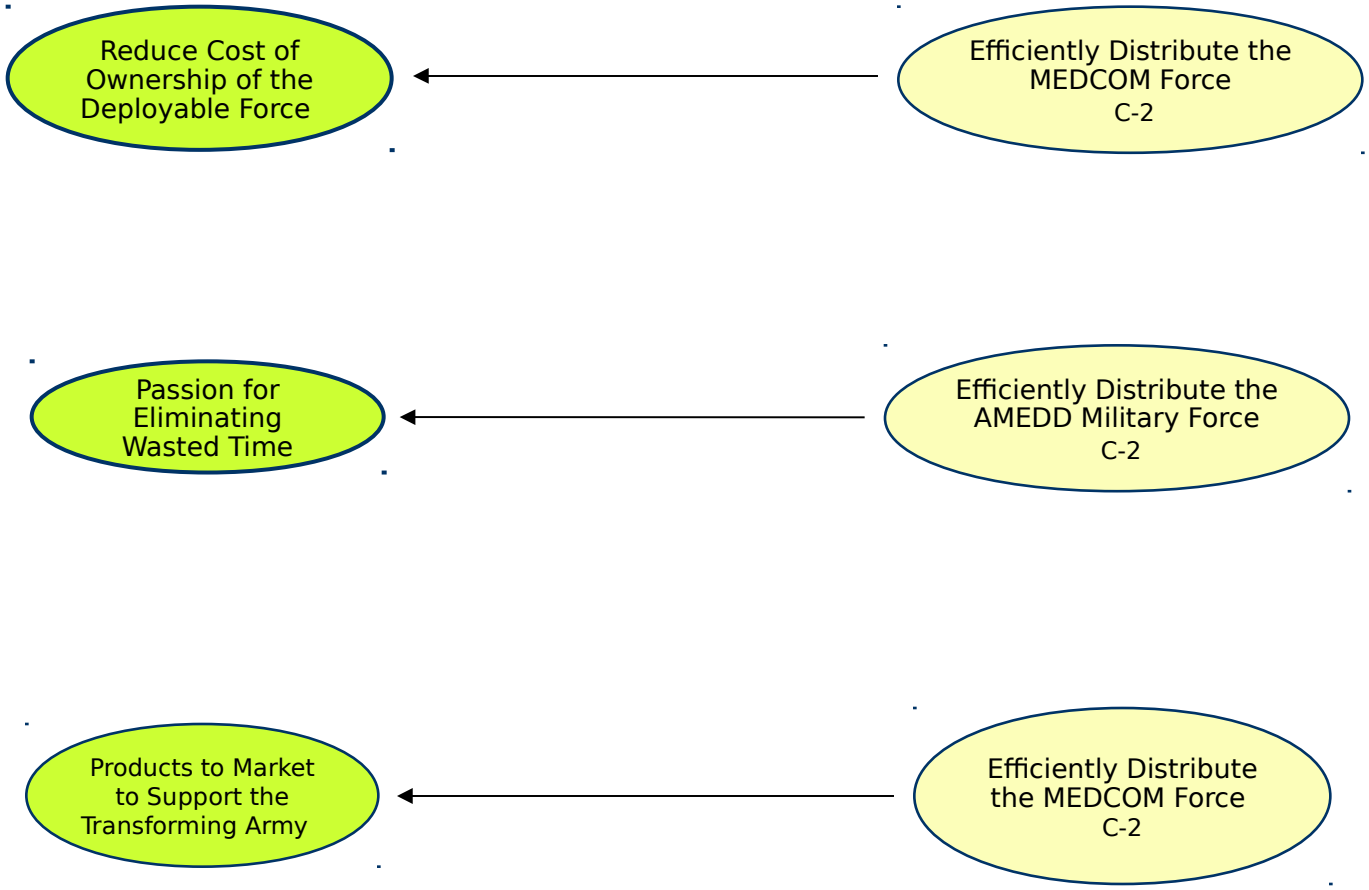
Reduce Cost of Ownership of the Deployable Force
Efficiently Distribute the MEDCOM Force C-2
Passion for Eliminating Wasted Time
Efficiently Distribute the AMEDD Military Force C-2
Products to Market to Support the Transforming Army
Efficiently Distribute the MEDCOM Force C-2

Dir of Personnel/ACSPER Customer/Stakeholder Mapping to AMEDD BSC

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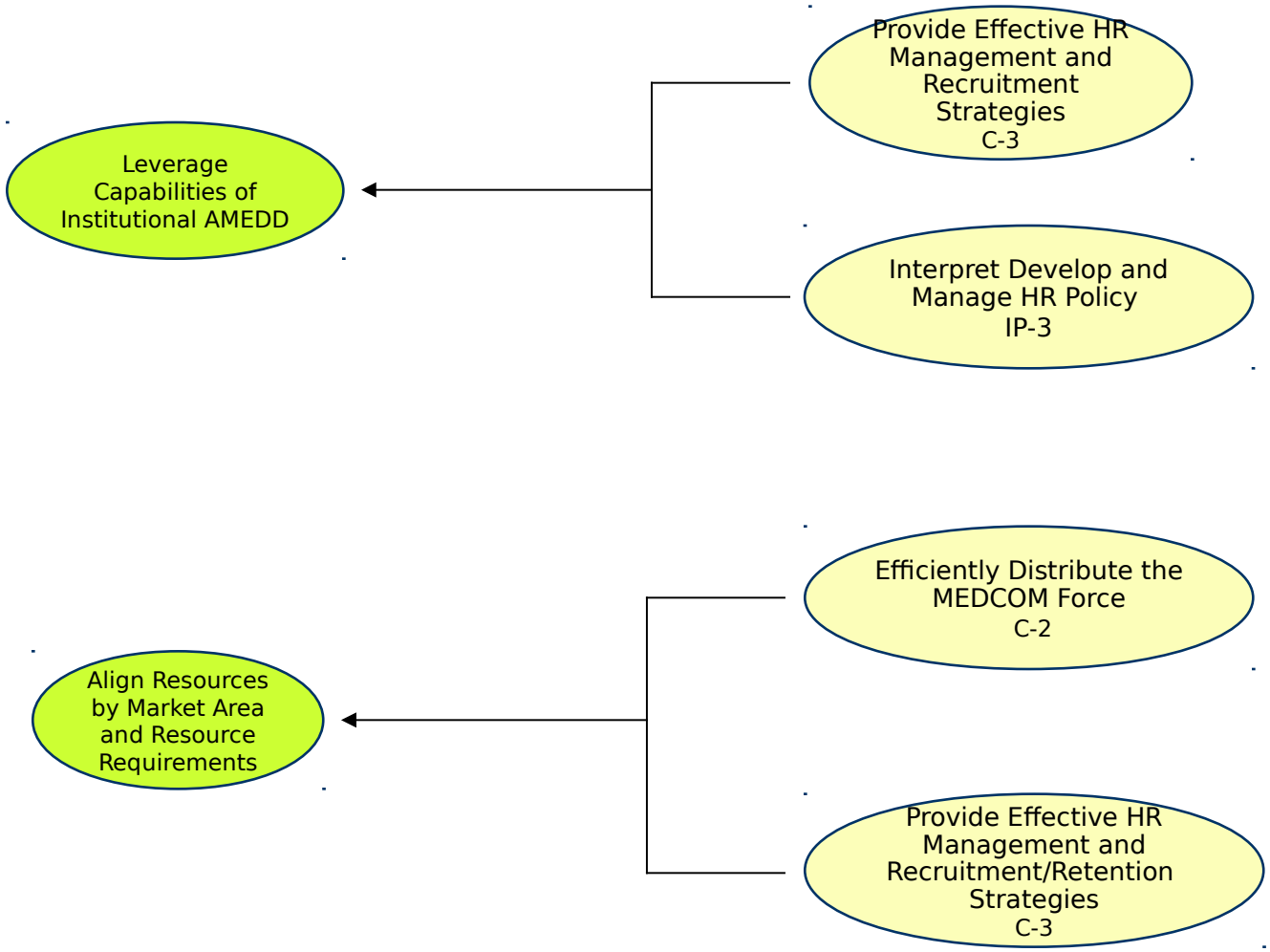
Leverage Capabilities of Institutional AMEDD
Provide Effective HR Management and Recruitment Strategies C-3
Interpret Develop and Manage HR Policy IP-3
Align Resources by Market Area and Resource Requirements
Efficiently Distribute the MEDCOM Force C-2
Provide Effective HR Management and Recruitment/Retention Strategies C-3

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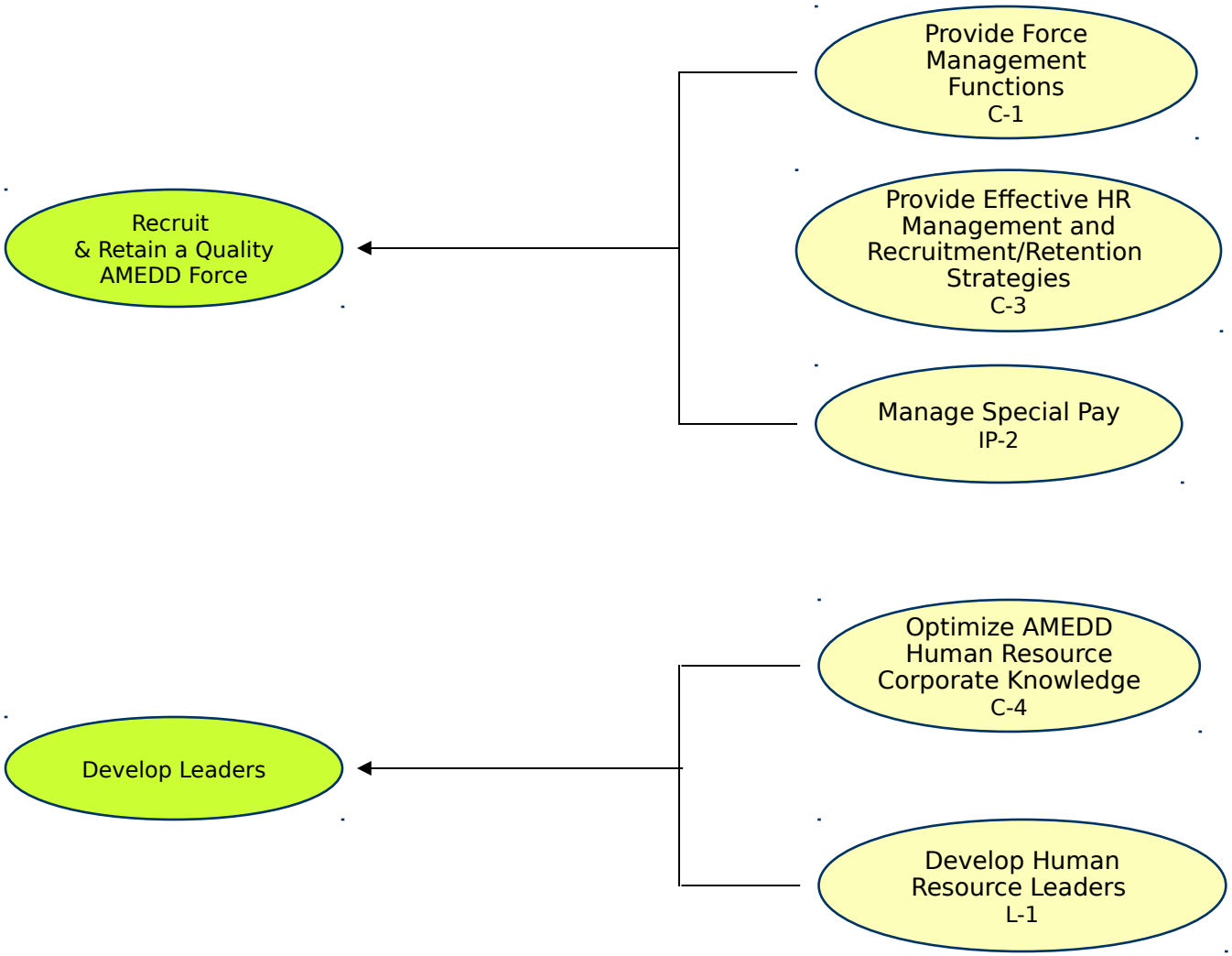
AMEDD | Directorate of Personnel/ACSPER


Recruit & Retain a Quality AMEDD Force
Provide Force Management Functions C-1
Provide Effective HR Management and Recruitment/Retention Strategies C-3
Manage Special Pay IP-2
Develop Leaders
Optimize AMEDD Human Resource Corporate Knowledge C-4
Develop Human Resource Leaders L-1

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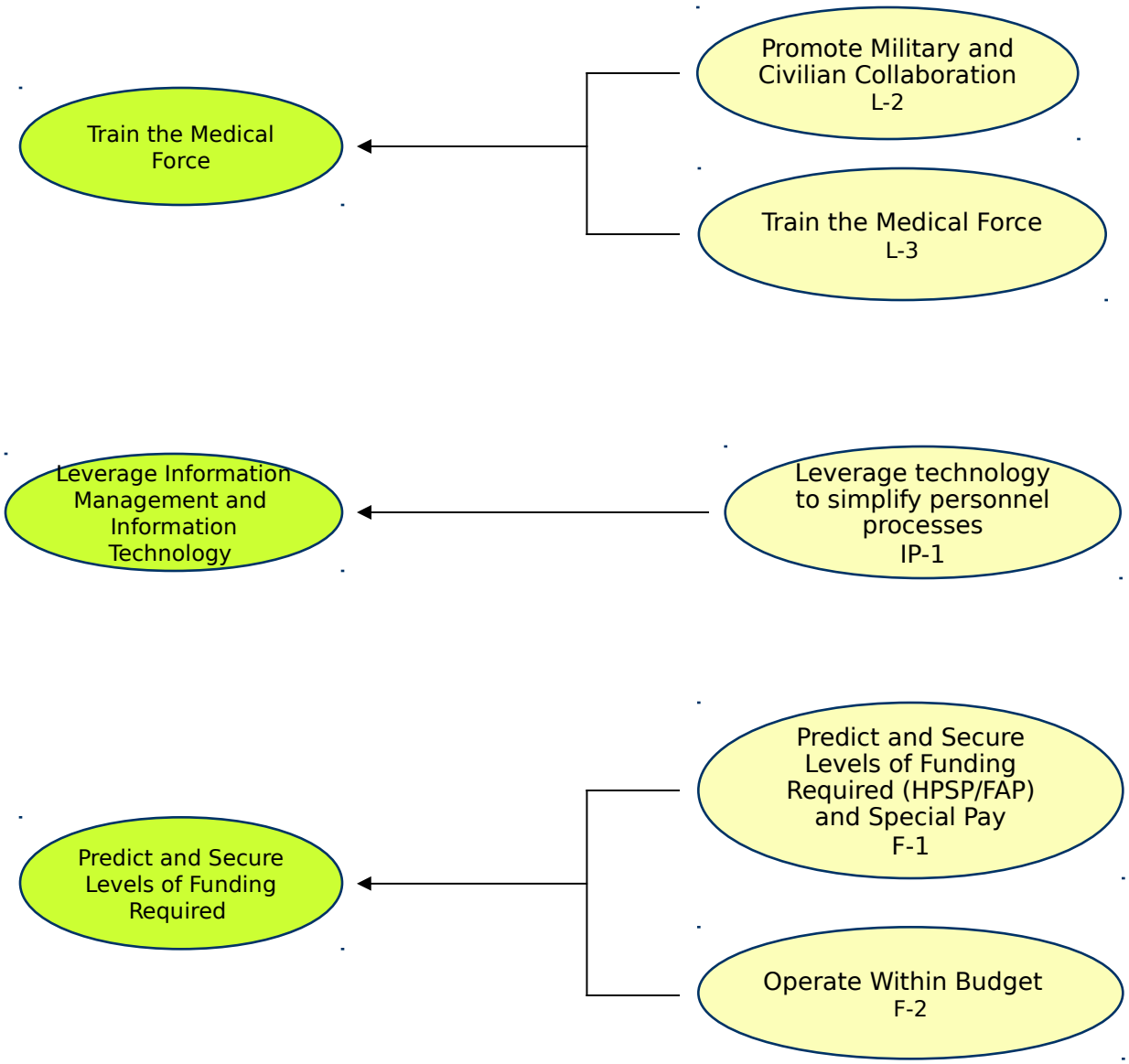
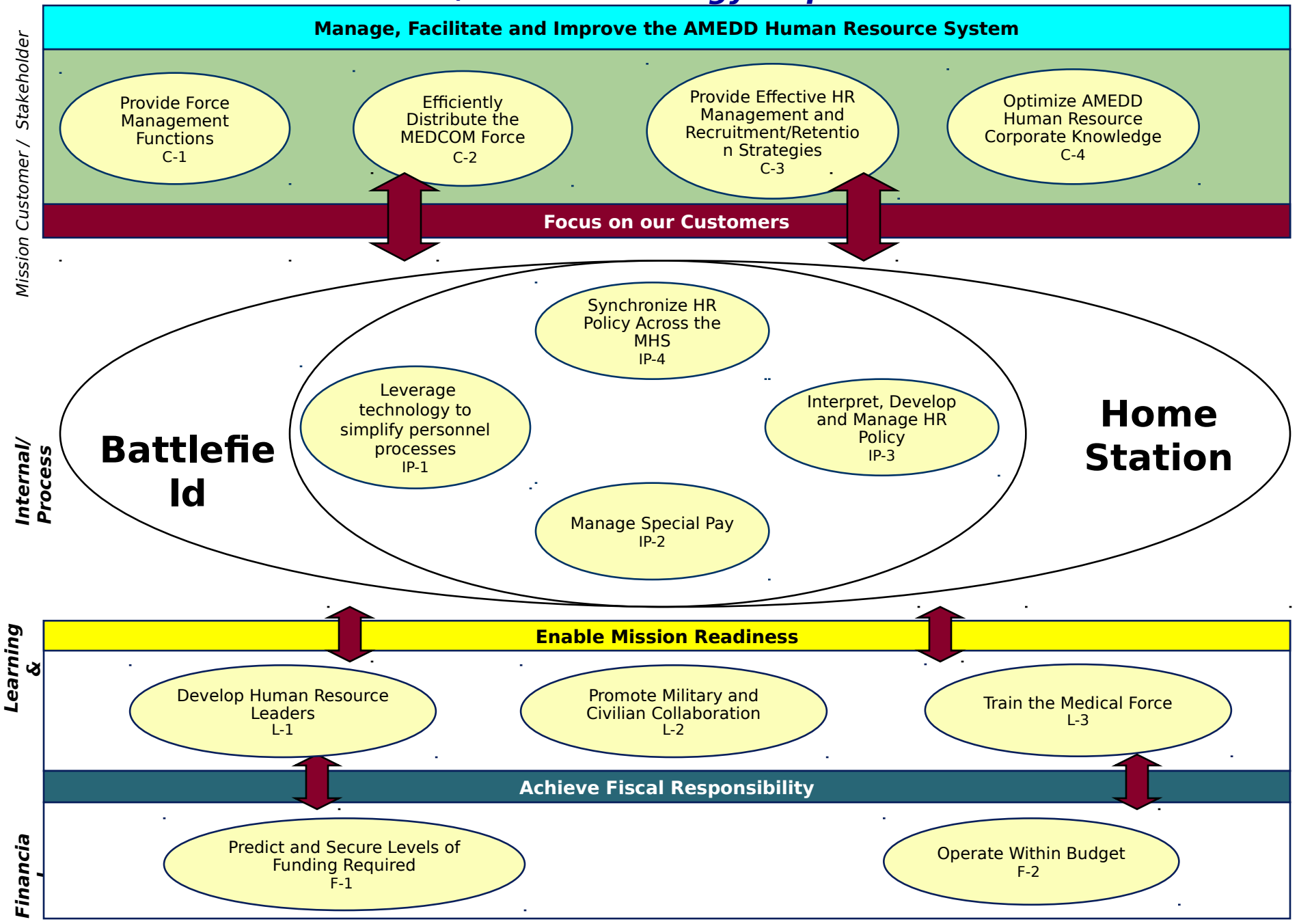
AMEDD | Directorate of Personnel/ACSPER


Train the Medical Force
Promote Military and Civilian Collaboration L-2
Train the Medical Force L-3
Leverage Information Management and Information Technology
Leverage technology to simplify personnel processes IP-1
Predict and Secure Levels of Funding Required
Predict and Secure Levels of Funding Required (HPSP/FAP) and Special Pay F-1
Operate Within Budget F-2

Directorate of Personnel/ACSPER Strategy Map

9 DEC 03



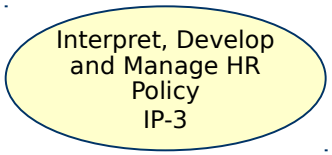
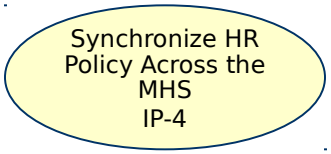
Goal 1: Manage, Facilitate and Improve the AMEDD Human Resource System

Strategic Theme	Objective Statement	Measure	Target FY 04	Initiatives
Mission/ Customer Chris Christopher Provide Force Management Functions C-1 JoAnn Robertson/Nancy Quick	C-1 Maintain AMEDD force structure to support objective force models/BES.	C-1a - Aggregate Officer strength measured to BES (quarterly review)	C1a - 95%	-OSD/HA/G1 Retention/ Recruiting Initiatives
		C-1b - % Fill (civilian strength against requirements of target hard to fill medical series) Green - 90% and Above Amber – 80% to 89% Red – Less Than 80%	C1b – 90%	-Direct Hire, Title 38 Pay Authorities, Title 10/Civilian Personnel System
Efficiently Distribute the MEDCOM Force C-2 COL Parker MAJ Dickinson LTC Glenn	C-2 Analyze and distribute a capable force with appropriate grades and skills in numbers sufficient to satisfy force requirements IAW CSA manning and CG's guidance.	C-2a - % fill of distributable inventory measured against authorizations for select AOCs in accordance with ODP and CG guidance	C-2a - 95% of MEDCOM units (quarterly)	-Use of ODP BCA
		C-2b - % PROFIS fill rate vs. PROFIS requirement (MODS).	C-2b - 95%	-PROFIS Annual Conference

Goal 1: Manage, Facilitate and Improve the AMEDD Human Resource System

Strategic Theme	Objective Statement	Measure	Target FY 04	Initiatives
Mission/ Customer Provide Effective Human Resource Management and Recruitment/ Retention Strategies C-3 JoAnn Robertson/Nancy Quick SGM Overman SGM Swarner	C-3 Develop and maintain programs and policies such as competitive compensation, professional development and career progression opportunities to recruit and retain a quality AMEDD force and enhance readiness.	C-3a – Improve Turn-Over in MEDCOM HTF medical occupations C-3b - % implementation of expanded drug testing for medical occupations C-3c - % increase in placement rate of TEAM applicants (placement/applicant) C-3d - % of soldiers retained in each category	C-3a – Keep turn-over at or below 12% each FY C-3b - 10% per month starting 3rd qtr FY04 C-3c - 15% increase in TEAM placement rate C-3d - 100% all categories quarterly	-*Continue* Direct Hire Authority to reduce time to fill civilian vacancies in civilian hard to fill (HTF) medical occupations -Quarterly civilian succession and recruitment plans to MSCs and CPACs -Title 38 Pay Authorities -Title 10/ Civilian Personnel System - Venture Capital Initiative C-3b -Army approved expansion of random drug testing for civilian medical occupations C-3c -MEDCOM Transition Employment Assistance Program (TEAM) - DA Civilian Satisfaction Survey Results C-3d -Staff Assistance Visits (SAV) RC Career Counseling (90-120 days)
Optimize AMEDD Human Resource Corporate Knowledge C-4 CPT Davis JoAnn Robertson/Nancy Quick	C-4 Produce and develop confident and competent Human Resource (HR) leaders and managers	C-4a - % of CPT/MAJ 70F's trained via the AMEDD Health Service HR Management course. C-4b - % CP-10 (Career Program for Personnel) civilian staff attending annual functional training	C-4a - 80% of Active & Reserve 70F's C-4b - 100%	-Marketing of 70F Course -Educate leaders (NCODP/ODP) AMEDD PER QTR VTC Bi-Annual HR Conference Quarterly HR Newsletter -CP-10 Conferences, Functional courses and workshops/ seminars

Strategic Theme	Objective Statement	Measure	Target FY 04	Initiativ
Internal/Process Leverage technology to simplify personnel processes IP-1 LTC Thomas-Roth	IP-1 Increase efficiencies and simplify processes by leveraging technology to automate personnel functions and internal processes, and where possible, in a joint context.	IP-1a - % of Deployed AMEDD Personnel Tracking automated IP-1b - % of 91A CT tracking and management tool automated	IP-1a – 100% IP-1b – 100%	-MODS TCS Tracking 91A CT Skill -Evaluate potential of identifying and tracking additional high dollar value civilian acquired skills training
Manage Special Pay and Salary Rates IP-2 Craig Buss JoAnn Robertson/Nancy Quick	IP-2 Monitor policies, programs and procedures to ensure compliance of the health professions special pay program within the needs of the Army; to include timely payments to the officer. Implement delegated pay flexibilities for MEDCOM civilian medical occupations	IP-2a - % of special bonus pay processed via MODS IP-2b - % of available Title 38 pay authorities implemented	IP-2a - 95% of eligible contracts submitted via MODS IP-2b - 33% of delegated pay authorities	-Input payment of bonus/special pay via MODS for payment by DFAS -Title 38 premium pay initiatives: On Call Pay Overtime Weekend Tour Sat/Sun premium Holiday Pay

Strategic Theme	Objective Statement	Measure	Target FY 04	Initiativ
Internal/Process  LTC Edwards	IP-3 Ensure that AMEDD HR Policy is consistent with Service and OSD HR Policy, and meets the needs of the AMEDD Soldier.	IP-3 - # of HR policies and regulations reviewed and updated	IP-3 – All regulations greater than 3 years old	-Identify baseline for currency and relevancy of all AMEDD HR Policies and Regulations for which we are the proponent -Develop and execute an Action Plan for review and update
 COL Campbell	IP-4 Participate in joint planning and policy development for HR management across components and the MHS.	IP-4 - # of Working Groups & Committees	IP-4 – Continued Emphasis and Participation to ensure AMEDD HR perspective is incorporated	-HRSC -DMHRSi Sub-Committee -Tri-Service Special Pay Working Group -TRO -DMDC -Med WG -Competency Tracking Workgroup -DIMHRS -PHS Initiative -HRTTF

Enable Mission Readiness

Learning & Growth

Strategic Objective	Objective Statement	Measures	Target FY04	Initiatives
Develop Leaders L-1 LTC Thomas-Roth JoAnn Robertson Nancy Quick	L-1 Develop Competent HR Leaders.	L-1a - % of officers completing appropriate MEL within 2 years of promotion zone. L-1b - % of supervisors of civilians who have completed or are completing Supervisory Development Training	L-1a - 100% L-1b - 80%	-HRC (East/West) Interface -Constituent Notifications -Continued Command Emphasis
Promote Military and Civilian Collaboration L-2 COL Campbell CPT Davis	L-2 Promote military, civilian and contractor collaboration to achieve integrated HR community. Institute cross-leveling opportunities between military and civilian personnel divisions.	L-2 - # Joint Military/Civilian HR Training Opportunities	L-2 – TBD (Baseline)	-Annual World Wide PER conference -ODP strategy development -WW Per VTCs -Off sites -Plan/Teach HR courses -Cross Training and Developmental Assignments/Details
Train the Civilian Medical Force L-3 JoAnn Robertson Nancy Quick	L-3 Improve competencies of Civilian Medical Force by increasing the number of career development plan coverage. (Train and Develop the Medical Force by enforcing Career Development Plans)	L-3 - % of Civilian Medical Specialties covered by Career Development Plans	L-3 - 32% of Civilian Medical Work Force covered by Career Development Plans	-Develop/Incorporate Career Path Master Trng Plan Course Descriptions Glossary Individual Dev. Plan -Increase coverage 10% annually -Focus on Career Field 53

Mission

Strategic Objective	Objective Statement	Measures	Target FY04	Initiatives
Predict and Secure Levels of Funding Required F-1 Craig Buss Marcia Chmiel Chris Christopher	F-1 Accurately predict and program MPA requirements to avoid unanticipated requirements and shortfalls in execution, budget, and POM years.	F-1 Predict and secure adequate funding for special pays and student programs	F-1 – 100%	-Synchronization meeting between AC/RC -Ensure close coordination with Army MDEP manager
Operate within Budget F-2 COL Campbell	F-2 Operate within budget without cost shifting to other bill payers	F-2 % of budget obligated	Estimate: 1 Qtr – 25% 2 Qtr – 50% 3 Qtr – 75% 4 Qtr – 100%	Green – 95-100% Amber – 85-94% Red - <84%